STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent

MUR_5405	<u>-</u>		
NAME OF C	OUNSEL: Michael K. Forde		
FIRM:	Hayer, Brown, Rowe & Maw LLP		
ADDRESS:	190 South LaSalle Street		
	Chicago, Tllinois 60603		
TELE	PHONE:(312) 701-8807		
	FAX:(312)701-7711		
The above-named individual is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission. Daniel W. Hynes Print Name 2/24/04 Date Signature Title			
Date	Signature Title		
RESPOND	ENT'S NAME: Daniel W. Hynes		
ADDRESS: 2020 W. Bradley Place			
	Chicago, IL 60618		
TELEPHO	NE: HOME		
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	DUNSEL: Michael K. Forde	
FIRM:	Mayer, Brown, Rowe & Maw LLP	
ADDRESS:_	190 South LaSalle Street	
•	Chicago, Illinois 60603	
TELE	PHONE:(312) 701-8807	
	FAX:(312)701-7711	
and is author	above-named individual is hereby designate prized to receive any notifications and other ormalisation and to act on my behalf before the <u>Jeffrey C. Wagner</u> Print Name	r communications
Date	Signature	Title
RESPONDI	ENT'S NAME: Hynes for Senate	
ADDRESS:	1525 N. Wells Strect	•
	Chicago, Illinois 60610	
TELEPHO	NE: HOME	· ·
E	BUSINESS(312) 337-2004	•